## **BUILDING PERMIT APPLICATION**

City of Grinnell, Iowa

Applicant to complete numbered spaces only.

1. JOB ADDRESS						
LEGAL DESCR	LOT NO.	BLK.	TRACT			
2. OWNER	MAILING ADDRE	ESS	PHONE			
3. CONTRACTOR	MAILING ADDRE	ESS	PHONE			
4. ARCHITECT OR DESIGNER	ARCHITECT OR DESIGNER MAILING ADDRESS			PHONE		
5. USE OF BUILDING:						
6. CLASS OF WORK: ☐ NEW	☐ ADDITION ☐	ALTERATION	□ REPAIR □ N	MOVE □ REMOV	E	
7. DESCRIBE WORK:						
8. VALUATION OF WORK		PLAN CHECK FEE		PERMIT FEE		
TYPE OF CONSTRUCTION		SIZE OF BUILDING (TOTAL SQ. FT.)		USE ZONE		
OCCUPANCY GROUP		NO. OF STORIES		OFF STREET PARKING SPACES		
9. SIGNATURE OF OWNER OR AUTHORIZED AGENT DATE						
The above signed acknowledges City Council approval is needed Prior to construction for any Urban Revitalization Tax Exemption.						
SITE PLAN (Dimensions from property Line to Foundation)						
WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT						
PERMIT FEE	ADD. FEES & PENALTIES	TOTAL FEES	VALIDATION	DATE	RECEIPT #	